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APPLICANTS Chulhee Lee, Goyang-City, KOREA, REPUBLIC OF;				
** CONTINUING DATA ***** <div style="text-align: right; margin-right: 50px;"><i>NONE</i></div>				
** FOREIGN APPLICATIONS ***** <div style="text-align: right; margin-right: 50px;"><i>NONE</i></div>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 02/05/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY KOREA, REPUBLIC OF	SHEETS DRAWING 28	TOTAL CLAIMS 20
<div style="border-bottom: 1px solid black; display: inline-block; width: 150px; margin-right: 20px;"></div> Examiner's Signature <div style="border-bottom: 1px solid black; display: inline-block; width: 50px;"></div> Initials		INDEPENDENT CLAIMS 9		
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TITLE Video display apparatus with separate display means for textual information				
FILING FEE RECEIVED 622	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> All Fees</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.16 Fees (Filing)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.18 Fees (Issue)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> Other _____</div> <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> Credit</div>	